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ABSTRACT

The Phoenix Early Head Start (EHS) program is a family-centered program intended to provide early, continuous, intensive, and comprehensive child development and family support services for first-time teen parents and their very young children. This report presents case studies of 12 families, all EHS participants, who agreed to be followed throughout their participation in the program so that their stories could be updated as they unfolded from one year to the next. The case study families were interviewed in August of 1997, 1998, and 1999. Four of the families had participated in the first two interviews but had withdrawn prior to the third interview. Additional information was obtained through conversations with family support specialists in May 2000. Common themes in the families' stories regarding EHS's role include: (1) assistance from caring staff; (2) reassurance from home visits and child development; (3) help in becoming good parents; (4) help with personal goals; (5) help with daily life; and (6) socialization opportunities for children and parents. During the study, most families made progress to widely differing degrees. Although somewhat apprehensive about life without the safety net of EHS, all eight families seemed much more confident than earlier, had some knowledge and understanding of their children and themselves, and had articulated and taken some steps toward achieving personal and family goals. (KB)

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Twelve Family Stories
Final Chapter

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Phoenix Early Head Start:

Twelve Family Stories

Final Chapter

by
Rick Heffernon
and
Linda Sandler

for
Southwest Human Development

July 2000

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About Phoenix Early Head Start

Phoenix Early Head Start is a program for first-time teen parents and their families. Part of a national initiative funded in 1995 to provide services for low-income pregnant women and families with children ages birth to three, Early Head Start is a family-centered program that is intended to provide early, continuous, intensive, and comprehensive child development and family support services for vulnerable families and their very young children.

Phoenix Early Head Start recruits low-income teens ages 13 to 19 in central/south Phoenix who are pregnant with their first child or who have an infant under six months of age. The program is designed to serve 120 families, with services provided through a three-pronged approach: weekly home visits, site-based socialization activities, and "brokered" services that link families with high-quality community resources. Male involvement is a major program focus, with concentrated outreach efforts to engage young fathers with their children.

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Introduction

Case studies tap into the rich background information that can only come from the stories of program participants themselves. They give voice to individual families' experiences, providing the "narrative" that lies behind the numbers and statistics that comprise an overall program evaluation. To develop some of this background information for the five-year program evaluation of Phoenix Early Head Start (EHS), case studies were undertaken with 12 families who were representative of all EHS program participants. Each of the 12 families agreed to be followed throughout their participation in the program so that their "stories" could be updated as they unfolded from one year to the next.

The case study families were interviewed for the first time in August 1997 and again in August 1998 and August 1999. At about the same time as each family interview cycle, discussions were also conducted with the family support specialists in order to obtain supplementary information about each family. Eight of the 12 original families participated in the third interview cycle in August 1999; four families had been disenrolled some time prior to the third round of interviews. Additional conversations with the family support specialists in May 2000 provided information about families' progress following their third interview. At that time, six of the families had transitioned out of EHS, with the remaining two families scheduled to exit the program in the fall.

Due to issues of anonymity, some background information could not be used in the individual family stories. Some of this information, however, has been integrated into a broad composite sketch, below, that will help explain who these families are.

Family Composite

Families entering EHS consisted of at least one teen parent who was the primary caregiver. The mother was considered the primary caregiver in 11 of the 12 families, the father in one family. Three of the mothers were married to the father of their children at the time of the third interview cycle.

By program design, EHS has focused efforts on engaging fathers with their young children. As of the third interview cycle, five fathers were "involved" (loosely defined as having relatively frequent contact) with their children, while children in three families had limited or no contact with their fathers.

Many of the teens in the case study came from troubled, disrupted families. Several had been living with extended families in situations that involved complicated familial relationships and included children of other relatives. In some cases, severely strained relationships had occurred between the teen parents and their parents or relatives. Living arrangements improved for some families between their second and third interviews—change from the previous year during which several of the teens had experienced upheavals in their living situation. Positive changes include some teens who set up independent households and other families who moved to larger houses or more stable living situations.

Some of the teen parents initially voiced ambivalent feelings about their impending parenthood. Two mothers said they seriously considered an abortion to avoid the responsibilities of parenting. One father threatened to abandon the soon-to-be-mother of his child when he found out she was pregnant and wouldn't have an abortion. All three eventually changed their minds and expressed satisfaction with their decisions to accept the role of parent.

For several families, drug and alcohol abuse had been a problem. These abuses were characteristic of some of the teen parents themselves, their parents and relatives, or boyfriends. Many of the families had contact with the criminal justice system. At the time of the first interviews, one primary caregiving parent was on probation and at least two non-primary caregiving parents were in detention. One teen parent's father died in prison and another's uncle was serving a prison sentence. Domestic violence, rape, or prostitution had also been reported in the background of three of the families.

Many of the teen parents experienced difficulty completing their education. Prior to their enrollment in EHS, more than three-quarters of the case study parents had dropped out of junior high or high school, and one parent reportedly had never attended any school at all. Over the course of the three years of the case study, several parents were in and out of school, and others continued to talk about plans to attend GED classes. At the time of the third interview, three of the parents had graduated from high school (with one subsequently enrolling in college), while five parents were not attending either school or GED classes.

Several parents faced special problems because they were undocumented immigrants, and therefore had to manage their lives under a different set of conditions than legal residents. Among the difficulties, illegal residents were not eligible for some types of public assistance. In one family, an illegally documented parent applied for health care through AHCCCS (Arizona's health care system for indigent people) but when illegal documents were discovered during the application process, the spouse of this parent lost his job—and the family's only source of income. Another parent without legal status, although successful in graduating from high school, has encountered trouble in obtaining a college scholarship to continue her education. Nonetheless, despite problems stemming from families' undocumented status, several parents have been able to find and maintain employment.

Some of the children in EHS families also faced problems. During the first year of the program, staff expressed concern about two babies that had exhibited poor health or failure to thrive. In addition, one family was investigated by Child Protective Services after their baby was injured. As the case study unfolded, some children were diagnosed with speech and language delays and, at or subsequent to the time of the third interview cycle, two of these children had been pre-enrolled in Head Start programs with special services, while the family of another child had been connected with services through the state's Developmental Disabilities Division (DDD). Several of the children also faced competition from a sibling: over the course of the three years of the case study, seven of the 12 parents had second babies.

Common Themes

As their children neared a third birthday, transition out of EHS became an issue for all eight families in this year's family stories. While several parents understandably voiced sadness and regret at the prospect of leaving EHS, they articulated positive feelings that suggested a generally good experience with the

transition process. Most of them talked about their experiences in EHS with some sense of accomplishment at becoming better parents, and some said they were looking forward to their children's next experiences in Head Start or preschool.

Several families displayed greater stability this year in their housing situations, and some showed limited economic progress. While several parents had steady employment, however, the tenuous nature of economic self-sufficiency for these families was also apparent. Occurrences such as an automobile break-down or loss of employment income due to health problems, precipitated financial difficulties for a few case study families. And while several parents talked about going back to school, they tended to seek the more immediate financial gratification of employment.

A number of this year's stories describe "busier lives" for families, leaving parents less time to engage in group socialization activities. Many parents talked about jobs, school, and second children, as factors that made it increasingly difficult for them to attend the monthly site-based program offerings. Two case study families also experienced second pregnancies this year, in addition to the five last year.

After three years of case study, it is apparent that each family has followed its individual path, affected in part by particular strengths, needs, program participation, and family backgrounds. Some parents seemed to be strong program "takers," while others engaged in program activities to lesser degrees. All, however, appear to have gained from their experiences. The family stories taken as a whole, and particularly with respect to EHS program experiences, have been consistent in exhibiting several distinct themes. The most prominent of these themes follow:

Assistance from caring staff—Parents continued to talk about their family support specialists and other EHS staff as people who cared about them and who provided them with assistance in many specific areas of their lives. They also said that their family support specialists helped them with their problems and relationships, and provided a crucial sounding board for their concerns because otherwise they felt they "don't have anybody that they can talk to." Many of the families mentioned they received emotional support from program staff, particularly in helping them deal with personal stresses. They continue to feel valued as a result of EHS staff's belief in them, leading several parents to talk about their increased self-confidence.

Half the families in the third interview cycle had to adjust to more than one family support specialist over the course of the case study due to staff turnover. While one parent expressed negative feelings about the experience, the others continued to feel supported. Families who maintained the same family support specialist throughout their time in EHS underscored again the supportive nature of the relationship, expressing the feeling "[We] can talk about a lot of things...about the family, how it's doing, about...whatever."

Reassurance from home visits and child development—Parents continued to say they received a great deal of information during their home visits, and articulated a growing sense of knowledge and understanding of their children's development. Home visits gave them regular opportunities to discuss problems, get information about specific topics they needed help with, and find out about their children's progress. The EHS nurses were a stable source of information and support to the families, providing periodic assessments of the children and support and assistance to parents with medical problems.

Developmental assessments by EHS staff helped reassure parents about their children's well-being, and parents appreciated the individual guidance and assistance they received when they encountered specific problems. Ongoing discussions about maintaining their children's health and safety continued to keep parents' attention focused on these issues. EHS staff also connected parents with needed medical and psychological assistance when necessary.

Help in becoming good parents—Case study participants strongly credit the EHS program with helping them understand their children and become better parents. Nearly all of them talked about dealing with the stresses of parenting—learning patience, learning to control their anger, and learning positive discipline techniques. Several of them also mentioned the parent-child playgroups as a place where they learned good parenting skills, and where their children had positive experiences. Parents continued to value the information about child development, health, nutrition, and safety they received from the family support specialists, nurses, and child development specialists. They also continued to appreciate the positive reinforcement they received from EHS staff regarding their role as parents, expressing the feeling that "...just the fact that [the staff] have been telling me I am...a good parent has helped."

Help with personal goals—EHS has continued to help parents try to stay on track and move ahead with their lives. Most parents talked about regularly "revisiting" their personal goals with their family support specialist, discussing where they wanted to go with their lives, and thinking through the steps necessary to get there. Their family support specialists provided assistance in helping them reach their goals in a variety of ways. They mentioned ongoing encouragement to stay in or return to school, with support in exploring programs and completing necessary paperwork. Other assistance was provided in locating and applying for jobs, completing and filing papers to obtain legal status, developing a budget and plan for savings, and connecting them with family planning services.

Help with daily life—After three years of program participation, several case study parents were better able to manage some of the activities of daily life. This was particularly true for families who now owned cars, and those who had jobs and a steady source of income. Conversely, those families without a reliable source of transportation and with sporadic income needed—and received— program assistance in keeping medical appointments, looking for work, and help in obtaining food and household items. Program staff also continued to guide families through government and medical systems. Parents were assisted in obtaining services through DDD, filing papers to gain legal status, enrolling in AHCCCS, and navigating the medical community.

Socialization opportunities for children and parents—While overall, parents were busier and had less time to attend EHS activities this year, several parents mentioned the play groups as providing good opportunities for their children to socialize with other kids and participate in a variety of play activities. Those parents who said they had attended some of the monthly socialization activities continued to enjoy talking and learning about different topics in a group setting. A few of the parents also continued to serve on the parent policy committee this year. But several of the parents said they had less time to attend the socialization activities this year than in the past, and some expressed regret that they were not available to participate because their lives were so busy.

The Stories Continue

The analysis presented above captures the essence of the journeys that 12 case study families made through Phoenix Early Head Start. This analysis will be integrated into the larger body of program evaluation data that will be published later this year as part of the final report for the EHS continuous improvement evaluation.

Overall, most case study families made progress during the study, though to widely differing degrees. The eight families still enrolled in the program at the end of the case study all faced transition out of Early Head Start but generally appeared ready to move on with their lives. Although somewhat apprehensive about life without the "safety net" of EHS, they seemed much more confident than earlier. They had some knowledge and understanding of their children and themselves, and had articulated—and taken some steps towards achieving—personal and family goals.

What follows are the family stories themselves. For the eight families still participating in EHS at the time of the third interview cycle, these stories are told in their own words, with additional background data included from other program sources. A summary of information from previous year interviews has also been included because this is the last "story year" of the case study. The stories of the four families who were disenrolled prior to the third round of interviews appear toward the end of the document. Because they were not interviewed in the current cycle, only the background information and previous year summaries are presented.

Monica and Tony

Monica, 20, and Tony, 23, along with their 32-month-old daughter and 19-month-old son, live in a small house belonging to Monica's grandfather in a neighborhood of older homes—some well cared for, others run-down. They have lived in the same house for more than three years. Monica's grandfather and uncle also reside in the house, as do other relatives on occasion. Monica receives AHCCCS benefits for her children, and also qualifies for subsidies for her personal health care, but otherwise the couple must make do with the earnings of Tony, who works full time. As of their third annual interview, Monica and Tony had been enrolled in Early Head Start for 32 months.

Monica heard about Early Head Start from nurses who check her diabetes. At the time of their first annual interview, Tony was working full time while Monica handled child care and housekeeping duties. They had recently experienced a difficult Child Protective Services (CPS) investigation after Tony had picked up their daughter improperly and fractured her arm. Early Head Start staff had assisted the couple during the investigation. They said the programs had also helped them in a number of other ways: program staff gave them job and career advice, taught them how to care for their daughter, provided frequent health monitoring for both Monica and her daughter, and gave advice during family problems. Monica said she enjoyed site-based activities for both the information and socialization opportunities, while Tony appreciated the male involvement specialist's help in finding a better job and trying to enroll in a G.E.D. program.

By their second annual interview, Monica and Tony had married and added a second child to the family. Monica went to work part time and the couple were able to purchase a car. They found the constant demands of work and child care to be tiring, but the car gave them a welcome sense of independence. They said that Early Head Start had helped them understand their children and become better parents. Program nurses regularly monitored the health not only of their children, but also of Monica who has diabetes and other health concerns. And they were grateful to male involvement specialist who had testified on Tony's behalf during a court appearance regarding the earlier CPS investigation. While their jobs prevented them from regularly attending program events, Monica had gone to some site-based activities in the past year and had also taken her daughter to a play group.

Monica and Tony describe little change in the past year. Tony: "Things are pretty much the same." He works at the same security job he has held for the last year and a half, and they continue to live in the same house. But other things have changed. Monica had to quit her job at a fast food restaurant due to health problems. Their car broke down, and so they have been forced to ask for rides from family members in order to get to work, shopping, and doctor's appointments. And through it all, their finances have suffered. Monica: "It's hard... We're behind on money, we're behind on everything right now. " Tony: "I've been working overtime as much as I can, so I can get this car running. Then we'll be back on track and we'll have transportation again."

Monica says she has constant stress. Monica: "[My family support specialist] tries to help, but I still have it—family, kids, house, money, bills. If it's not one thing it's another." Her health is a major

concern. "I need to get back to the doctor because I haven't been since I was pregnant." Early Head Start has encouraged Monica to take care of herself. Monica: "The nurse comes over to check the kids. She also comes over to talk to me. She's the one that took me to the doctor the first time I went. And I was happy because...she stayed there when the doctor sat down and had a discussion with us, told us about all the things that might happen and she stayed with me through the whole thing. They even paid for my doctor visit because I didn't have the money to go."

Their goals haven't changed much in the past year. Monica: "I want to make sure [the kids] are safe, have food, have diapers. I want to get my daughter potty trained." Tony: "I've been wanting to get back in school so I can improve on my skills, but it's just been so hard [with working] that I haven't been able to." Monica: I'm not planning to go to school or get a job at least until my daughter goes to school... She won't stay with anybody except my grandfather, but he's like 69 years old and I don't want to leave her with him—he can't handle her.

"[Our family support specialist] gave us a budget book... We do budget ourselves to a point, like what we can do and what we can't... It's just like my pay doesn't seem to go far enough."

Program staff have helped them learn to be better parents. Tony: "They've showed us how to interact with our children more, how to pay attention to them more when they want stuff. They've made us set goals for them and set goals for ourselves." The program has also taught them about child development. Tony: "Since the kids were born they've been showing us pretty much everything—how to change babies, how to bathe them, how to feed them, how to cope with stress when babies just cry for no reason. They've taught us a lot of stuff." Monica: "[My family support specialist] brings me a lot of information about potty training and getting them off the bottle."

Their attendance at site-based activities has been sparse. Tony: "I would love to go and be there with my kids, but my job, my schedule, won't allow it." Monica: "If it's on the weekend, like the picnic, there's no problem for him to go." Tony: "That was fun. They had a little bit of everything."

Monica says she enjoys the play groups and takes both her children. Monica: "The kids have so much fun. They always have some certain activity." Tony: "The last one I was at...they had different kinds of things like smells and sounds and basically [stimulated] all their senses to see how alert the kids were." Monica: "And they always have us sit down and sing nursery rhymes with the kids."

The family has had a variety of family support specialists since enrollment. Monica: "This is like the third one. I get along with her... She visits once a week usually, but sometimes we do our visit at play group... She always brings me [parenting] information and goes over the papers with me. We talk about a lot of stuff."

One of the things they discuss is birth control. Monica: "I'm on that, I got that already." Tony: "We've already settled that we're only going to have two kids and no more. Two's enough." They also discuss child health. Monica: "The kids are all caught up on their shots and everything. That's one thing [my family support specialist] always makes sure." Another thing they talk about is child safety. Monica: "She told us about those plastic covers for the outlets." Tony: "All of our electrical outlets are pretty much covered up." And they discuss economic self-sufficiency. Monica: "She gave us a budget book." Tony: "We do budget ourselves to a point, like what we can do and what we can't. And which bills need to be paid. It's just like my pay doesn't seem to go far enough."

Other staff also visit the couple. Besides their family support specialist and the nurse, they have been visited by a speech therapist for their daughter. But Tony regrets that he hasn't had much recent contact with the male involvement

specialist with whom he has bonded. Tony: "He makes me feel that I should keep on succeeding and not fall back… He says if you fall, just get back up and keep on going… I guess he figured I didn't need any more help…but sometimes guys have questions that are kind of hard to ask women." Tony's recommendation to improve the program: "For the males to have more assistance—if the father is still there."

Program staff have already talked to Monica and Tony about their eventual transition from Early Head start. Monica: "They told me I was going to have to be out when my daughter turns three in November. That's when they'll try to get her into school—Head Start. That's one of the reasons they wanted me to go to play group because she's not used to being around other kids." They are saddened at the prospect of leaving Early Head Start. Tony: "We'll lose a lot of people who helped us out. That's the main thing we're going to be losing. And the assistance they provide, the help."

Monica says the program has made a difference in many aspects of their lives: "In everything—education, health, even when we were real low on food they gave us food boxes." Tony says Early Head Start has given their children an advantage: "Comparing my childhood to [that of] my children, I never had what they have. This [program] was never around when I was a kid. I'm not saying it's okay to be a teenage parent, but my children…are going to have a better start school-wise than what I had…[They] are going to be really educated to the point where they're able to graduate… The program has just been wonderful for us."

Epilogue—In the six months following their final interview, Monica and Tony continued much as before with one improvement—they managed to get their car running. They also had some troubling news—they learned their daughter was diagnosed with a developmental delay. With the help of Early Head Start, the couple enrolled their daughter in a nearby Head Start program that would provide her with special services. Both parents accompanied the girl to her first day of Head Start, and Monica soon began volunteering at the school. They exited Early Head Start in February 2000.

Alysa

Alysa, 19, and her son, 37 months, live in an apartment in a Phoenix public housing project. The father of her son is not involved with them, but Alysa is pregnant with a second child and plans to marry the father of this child. She has not completed her high school education and has been unemployed for more than a year, but she manages to get by on public assistance in the form of food stamps, TANFF, and AHCCCS benefits. Due to her pending transition out of the program, she no longer receives home visits, but still can attend activities, play groups, and parent committee meetings. At the time of her third annual interview, Alysa had been enrolled in Early Head Start for 34 months.

Alysa was encouraged to join Early Head Start by an older sister who was also enrolled in the program. At her first annual interview, she and her son lived in an economically depressed neighborhood with her mother, three younger siblings, and an older sister and her child. She had dropped out of high school but held a steady job at a grocery store. Her mother provided child care while she was at work. Alysa said that Early Head Start had helped her deal with her biggest problem—transportation—by providing rides to activities and medical appointments. Her family support specialist had worked with her to set a number of goals, including getting back into high school. She felt that home visits were stimulating for her son. She hadn't attended many site-based activities due to her work schedule, but when she did go she found them to be fun and interesting. She liked the activities because they gave her information on how to care for her baby, and provided an opportunity to interact with new people.

By her second interview, Alysa and her son had moved to an apartment in a Phoenix public housing project. She had quit work and stopped attending a charter school where she had hoped to complete her high school education. She had also lost the family support specialist she'd had since enrollment. Transportation continued to be a problem for her, as did making ends meet on public assistance with no support from the father of her child. She served on the Parent Policy Committee, but had lost interest in site-based activities and expressed some general complaints about Early Head Start. Nevertheless, she credited the program with monitoring her son's safety, health, and development, and for helping her to learn about parenting, and she said play groups were good for her son because they taught him to share with other kids. Her main personal goals were to complete high school and get a good job. She also said she hoped to become pregnant again because she wanted a daughter.

Alysa did not make any progress on her major personal goals in the past year. Regarding education, she says: "I haven't tried to go back and get a GED… I'm going to try to go back and get my GED as soon as my son starts school in September." And regarding employment: "I'm looking for a job, but I don't want to get one right now because [my son] is not in school and I don't have a really steady baby sitter."

As she had hoped, she did become pregnant in the past year. She expects the father of this child, who is her fiancé, to be an involved parent and provide financial support. She also expects to resolve her transportation difficulties and not have to rely on the city bus system. "In a couple of weeks I'm going to get a car… I won't be home all of the time…and I'll have more time with my son when I'm not in school."

Alysa feels her son has made progress on the goals she set for his development. "Now that he's three he's improving a whole lot on his language. He talks more and I can understand what he's saying. He's potty trained." While she feels that Early Head Start has helped her be a better parent, she credits her mother for much of what she knows and practices. "They helped me out a little bit with him. They told me what's healthy for a baby to eat, to keep his hygiene up. Everything else I learned from my mom... My mom already showed me what to do."

One thing she learned from the program, however, stands out. "Not to slap your child. Have a calm voice when you talk. Don't punish them in a bad way. Teach them right from wrong—don't let them do something wrong when you know it's not right. Tell them it's not right. It has helped me out with discipline. I've kind of toned it down a little bit because some things they tell us to do, it doesn't affect every child. Every child acts different."

One thing she learned from the program... "Not to slap your child... Don't punish them in a bad way."

She has not been to most of the site-based activities, but made an effort to attend one on discipline. "I liked that one because some people discipline their kids in different ways. Some tell them to stand in the corner, some spank their hand, some tell them to go lie down. They tell us to discipline them, don't yell at them. Talk to them in a level voice where they can understand you. But you ought not to bribe them." She also wishes she had attended another activity of interest. "They had one to talk about career, but I didn't go. So I could have probably been able to get a job right there, but I just didn't go."

She regularly takes her son to play groups. "He loves play group. Different kids, toys, he gets to play with his cousin... I've missed only a couple of them." She also is a member of the Parent Policy Committee and the Parent Policy Council. As a Council member, she participated in a memorable trip to Washington D.C. "That was for us to meet the head administrator of the program and for us to find out information on different sites. It was real fun. Different scenery, different people. They had different events every night. There was one particular one I liked. It was about crack babies. That was one that caught my eye."

A little over a year ago, Alysa was assigned a new family support specialist, and her relationship with the "new' family support specialist has deteriorated over the course of the past year. "At first we got along, but she started pulling away, didn't try to help me get my GED. It's like she didn't try hard enough to push me to go and get it. I just gave up. I wasn't satisfied with her being my family support specialist." Her family support specialist, however, did help her in some ways related to her son's health and safety. "She would push me to go the doctor's appointments, and give me [bus] tokens for transportation... She gave me those plug-ins to put in the top [of electric outlets]." Other staff also visited periodically. "The nurse, she came out and visited... to check up on [my son's] health. He had gained a few pounds and gotten taller."

She has already begun her transition out of Early Head Start, following a plan she discussed with her family support specialist before home visits ended. "That was our last visit when we talked about transitioning out of the program—when I leave, what program I'd be going to next after this. They were saying he would have to go to a Head Start. He couldn't go to Early Head Start any more. They helped me get him enrolled...down the street." Because she was elected to the Parent Policy Committee, she will remain eligible for some Early Head Start services until her term of office expires in November. "I still get to go to play groups and activities, but as far as home visits, no." She says she isn't worried about losing the program. "I'm happy, but my son probably isn't as happy because he doesn't really know. He's going to a different school with his cousin is all he knows."

She feels that Early Head Start could be improved. "They need to have nicer people, like the family support specialists could be nicer and try to go out of their way to help their families, because some of them don't help their families enough. They should expand the home visits to two hours, and twice a week instead of once a week, so the family support specialists have enough time to talk about what's on the family's mind. And the activities…have them longer so the kids have enough time to play when they go out there."

When she thinks about what she might miss about Early Head Start, she can name only two things. "Transportation and play groups are about the only two I like… They helped me out with the transportation… You can depend on them to come pick you up."

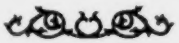
Epilogue—In the two and a half months following her last interview, Alysa's situation did not change much. She remained unemployed, not enrolled in school, and living in the same apartment. As planned, her 3-year-old son began attending Head Start in September 1999. During this time, she also gave birth to her second child, a boy, but did not marry or move in with her fiancé. She exited Early Head Start in November 1999 after her term on the Parent Policy Committee expired.

Mariana and Raul

Mariana, 21, and her husband Raul live with their 27-month-old son in a rented two-bedroom home that they share with a roommate, a single mother and her two elementary school age children. Raul works full time at a recycling plant and their roommate holds a full-time job. Mariana is pregnant and is staying at home to care for their child. The couple receive WIC benefits for their son and have applied for AHCCCS for their expected baby. At the time of their third annual interview, they had been enrolled in Early Head Start for 34 months. Both are monolingual Spanish speakers, and in the past have been interviewed together with the help of a translator. For this interview, only Mariana was available.

Mariana found out about Early Head Start from a staff member at a school where she volunteers. At their first annual interview, the couple were living in a small guest house behind the main house in which they live now. Raul worked second shift at a salvage yard and sold products at a weekend swap meet, while Mariana stayed home with the baby and volunteered at a local school. The couple said that Early Head Start had taught them how to prepare for having a baby when Mariana was pregnant, and how to care for their son once he was born. Site-based activities had provided their son with play opportunities. The program had also provided services such as medical advice, translation assistance, and emergency milk supplies when WIC vouchers ran out.

At the time of their second annual interview, the couple still lived in the same guest house, but they had added a roommate and her two children. They said they were getting along better economically because Mariana had gone to work. Among other things, they had purchased a car and planned to save some money. But now that she was working, Mariana regretted that she couldn't attend site-based activities and support groups, or serve on the parent committee as she had previously. Mariana and Raul said Early Head Start had taught them how to be good parents, helped them learn about how their son develops, encouraged them to talk and play with their son, taught them how to make their home more child safe, and helped Raul find employment. Early Head Start staff also regularly monitored their son's health, and frequently offered advice and support on a variety of issues, such as frustration over their son's growing independence as a toddler.



Mariana and Raul made some major changes in their lives during the past year. Mariana became pregnant and quit her job, and the family moved into a larger house that stands in front of the small guest house they had rented for the last two years. Regarding her pregnancy, Mariana says it was planned. "I'm pretty happy because we're going to have another baby. We wanted another baby, but just two, no more than two children." She says she plans to go back to work, but not right away. "I'm going to need to stay with my child for about a year and a half, like I did with my son."

She considers the move into a new house very positive. "This one has more room, it has a bigger yard, and we're a little more comfortable." Her new situation, however, has prevented her from improving her English literacy. "My family support specialist had me going to English classes. But since I have the child now and the two kids [of her roommate's] here are on summer

vacation, it's hard for me to go. Their mother has to work and the kids stay here at home."

Early Head Start has helped Mariana cope with some of the stressors in her life. "My son was putting me through a lot. He wanted me to carry him all day... He cried if I left him.... I talked about this with [my family support specialist] and with [my husband] and we came to a decision." Mariana decided to stop responding to her son's crying, and it has worked for her. "If you don't want to give him things he starts to cry. So I tell him, 'No, I'm not giving it to you.' And he cries for a little bit...but I don't pay him any attention and he calms down and stops."

> *"When I was first pregnant [with their second child], I started getting really depressed... [My family support specialist] had me talk with a psychologist... Now I feel a lot better."*

The program has also helped her become a better parent. "They've helped me be so patient with my son. It's helped me to know when I do things right or not." Among the things she has learned is how to look out for her child's safety. "I take a lot of precautions. For example, if he's playing outside in the front yard, he doesn't go out into the street. He stays in the yard."

Mariana has also learned about her son's growth and development, particularly as her son has reached two years of age. "My family support specialist told me this is when they start becoming a little rebellious. They want everything for themselves...that it's like they're trying to see how much control they have over their parents." She has also learned to provide her son only nutritious foods. "When my son doesn't want food, I say, 'Okay, you don't want to eat? Then you aren't going to eat, but you're not going to get sweets or anything else.'"

While Mariana used to go to almost every site-based activity, she says that first her job, and then her pregnancy has kept her from attending in the past few months. She has also not been attending support groups, play groups, or other activities due to her child care responsibilities at home. Likewise, Raul has only attended one activity for dads because of his work schedule.

Raul and Mariana have had the same family support specialist since enrolling in the program, and Mariana says they have a strong relationship. They receive home visits once a week, and Raul participates when his work schedule allows. "We talk with her a whole lot about the family, how it's doing, and about us and whatever. I know that with her I can talk about a lot of things.... We all chat. When it's the three of us [including Raul] we have a nice talk."

Her family support specialist regularly goes over health and prevention issues, such as getting prenatal care, taking birth control, and preventing illness. "She tells us, 'Pretty soon it'll be time to take [your son] in for his immunizations. Or, you need to take him in for a checkup.' And she tells me, 'You've got to be taking your vitamin pills, and it's important to see the doctor.'" They also discuss safety in the home. "She got us some of those safety clips for the cabinet doors because my son was opening them. He started when he was little, but now he does it more--he opens all the drawers, takes things out, and now he opens the doors."

Sometimes they talk about emotional issues. "When I first was pregnant, I started getting really depressed. I was going through lots of changes and everything would depress me. So I spoke with [my family support specialist] and she had me talk with a psychologist, and now I think it was just I was in the beginning stages of pregnancy and going through these changes. Now I feel a lot better." And they occasionally discuss family finances. "My family support specialist has always told us whenever both of us are working, 'Try to save away something. Perhaps the day may come when one of you stops working, and you will be in need if you don't have something to carry you over for awhile.'"

Both Early Head Start nurses have visited Mariana to provide services. "One nurse comes to check on [my son], and I think it's about every six months. The other nurse from Early Head

Start, the one that's helping me with my pregnancy, just recently visited for the first time.

Mariana credits her family support specialist for helping her through a difficult time with her pregnancy. "One of my tests came out showing an infection or something... I started feeling so bad that I went to the emergency room... So I talked with [my family support specialist] about this, and the nurse came to visit me at home." Then a doctor told Mariana her unborn child probably had Down's Syndrome. "At first I felt awful. I started crying... He told me I could go for more tests to make sure, but that these tests were going to be like $1800. When I talked to my family support specialist about it, she said, 'Oh, no. We can find this cheaper... Just keep resting. I'll call to find you a place where you can get these special tests.'"

In the past year, program staff have discussed with Mariana her son's transition out of Early Head Start. "My family support specialist gave me all the paperwork for when [my son] turns three years old... He will be going into Head Start, and when that happens, the time will end for receiving this help. When he turns three, the visits will only be once a month, but when he goes into Head Start at, like, three years and four months, the visits will stop."

Mariana says that home visits and site-based activities are what she will miss the most when her family transitions out of the program. "I think we're going to feel it when the time comes because he will have been with them for three years... They've given us a lot of help... I'm not going to have anyone right there to remind me about his immunizations." But Mariana feels her family is better off than a few years ago. "I think it's going well. We have more communication. [Raul] comes home from work and we talk about how the day went, what he did, what I did. We talk about what we're going to do in the upcoming week with the money, what must be paid. Before he was saying, 'You're spending too much.'... We were wasting a lot... Now we make a plan and decide what we need in the house, or what he needs for his job."

Epilogue—Since the last interview, Mariana and Raul's living situation has changed somewhat. The have stayed in the same house, but instead of having a roommate with two children, they have Raul's mother living with them. And contrary to the diagnosis of one doctor, Mariana gave birth to a healthy child. The family remains fairly self-sufficient economically; Raul has been working full time in construction, his mother holds a job, and they now have two vehicles.

Mariana has continued to participate in regular home visits, though she has not taken advantage of most other program activities. Some concerns have been raised by Early Head Start staff over her health practices for the children. Despite medical coverage for both boys, she has not kept them up-to-date with all of their recommended check-ups, though she has kept them current on their immunizations. Recently the older boy was diagnosed with speech delays. He has, however, been pre-enrolled in a Head Start program that will provide special services to address this issue. That program begins in the fall, at which point Mariana and Raul's family will exit Early Head Start.

Rosalie

Rosalie, 19, and her 28-month-old daughter live in a rented house with other family members, including her mother, two older brothers and a sister with two young children. This living situation has remained fairly stable for several years. The father of Rosalie's child also resides with them periodically, but contributes little for child support or household expenses. Family members pool their resources: One of Rosalie's brothers provides most of the income for the household; Rosalie works part time; her daughter receives benefits from WIC and AHCCCS; and Rosalie's sister receives TANF and food stamps. Nevertheless, the family has difficulty meeting basic living expenses and has no car available. At the time of her third interview, Rosalie had been in Early Head Start for 31 months. Her mother and siblings sometimes participate in home visits and program activities. While Rosalie speaks some English and has graduated from high school in Phoenix, she asked to be interviewed with the assistance of a Spanish translator.

Rosalie found out about Early Head Start from a counselor at the high school she attended. During her first interview, Rosalie said that Early Head Start taught her about parenting and how to treat her child. Site-based activities had helped her daughter learn new skills, and had given Rosalie ideas on activities she could do at home with her daughter. Her family support specialist had provided Rosalie with personal assistance and help in understanding her school work. Among her goals was to complete high school.

In her second interview, Rosalie said that Early Head Start had helped her get medical assistance for her daughter, sometimes provided diapers and other necessities, and helped explain her child's puzzling behaviors particularly regarding food. Site-based activities had shown Rosalie how a child develops and the best ways to treat a child in an emergency medical situation, and her daughter liked the play group because there had been many children and toys. Rosalie said she looked forward to her family support specialist's regular home visits because she trusted her to give good advice on parenting and to provide emotional support and motivation to meet important goals, such as finishing high school and finding a job.

In the past year, Rosalie's home situation has not changed much, but she has made progress in some key areas of her life. Most important, she graduated from high school. Now, with the help of Early Head Start, she is searching for scholarships in order to attend college. So far, it hasn't been a successful search. "There's a scholarship for $1000 [but] it's been really hard to get because...I don't have my legal status." Rosalie says she is working with Early Head Start staff to obtain the necessary legal papers and, if successful, she hopes to win a scholarship and attend college next second semester.

With the help of her family support specialist, Rosalie found a part time job as a child care provider for Early Head Start support group meetings. The extra money has been welcome. "I try to make sure I get my daughter diapers and some of the things that she needs." Her family support specialist, however, advises her not to spend it all. "She tells me, 'Save something away for [your daughter], at least for

when she gets bigger.' With what I make, I try to save something."

Rosalie feels she has a good relationship with her family support specialist. During home visits they sometimes discuss her health. "She helps me understand what is good and not good for me." For example, "I asked her which is the best contraceptive." They also talk about goals. "When I felt like I wasn't going to finish high school, she'd say, 'You're in your last year. At least graduate... If you want to go to college, we can help look for some grants or scholarships.'" And they talk about her daughter's health and safety. "I asked her about the things to cover the outlets [because my daughter] likes to get into them." Also, "We talk about [vaccinations], but not so much lately because she has all that she needs now. But ever since she was born she's never failed to get her vaccinations when she needed them." Other staff members also visit regarding her daughter's health. "A nurse comes to see how she's developing... It's the check-up where she uses the blocks and sees how she plays and what she does." In addition, the male involvement specialist has been working with Rosalie on obtaining citizenship papers.

"When I felt like I wasn't going to finish high school [my family support specialist] would say, 'You're in your last year. At least graduate.'" "[Now]...there's a [college] scholarship for $1,000 [but] it's been really hard to get because...I don't have my legal status."

Recently Rosalie and her family support specialist have been discussing transition out of the program after her daughter turns three. "We talk about plans for how my daughter is going to go out of this program... how to get her in Head Start. She gives me a lot of information about Head Start." They also have discussed other transition plans. "She said that when the time comes to leave the program that the visits won't be the same with one or two visits a week. It's going to be maybe one visit in two weeks." But Rosalie isn't apprehensive. "They're preparing us for when it happens. They're letting us know little by little. It's not going to be a real big change, it's going to be the same because...she'll go into regular Head Start."

Due to her schooling Rosalie has only attended a few play groups, and due to her work she has missed the support groups, but she continues to attend site-based activities regularly every month. Among her favorites was a session on sexually transmitted diseases and their prevention. She says the site-based activities are one of the aspects of the program she will miss the most.

Another aspect of Early Head Start that she will miss greatly is the information she receives from Early Head Start staff. "They give you a lot of good advice... They tell you all about how kids grow, and the different phases, and how the body is formed." That advice has helped her become a better parent, she says. "Before I didn't have patience, and kids can really stress you out. I used to yell at [my daughter], but no longer."

Epilogue—Since her last interview, Rosalie's living situation has essentially remained unchanged, with the family continuing to struggle to pay the bills. She has remained very active in Early Head Start, rarely missing home visits and regularly attending site-based activities and play groups. She has made some progress in self-sufficiency. With the assistance of the male involvement specialist, she obtained a work permit, applied for job placement through Chicanos por la Causa

(a local community-based organization), and was hired in an assembly-line job. She also won an $800 education scholarship from Head Start and hopes to enroll in Phoenix College.

But Rosalie has endured some setbacks regarding the health and development of her daughter—she was diagnosed as moderately delayed for preschool and also shows signs of anemia. In response, Rosalie has weaned her daughter from a baby bottle and is in the process of developing a goal to improve her daughter's nutrition. She has also moved forward with transition plans by pre-enrolling her daughter in a Head Start program that will provide special services to address the developmental delay. When her daughter begins regular Head Start in August, Rosalie plans to exit Early Head Start.

Rene

Rene, 20, and her 36-month-old daughter live with her mother and sister in a house where they have their own room and telephone line. The father of the child regularly interacts with Rene and her daughter, and contributes child support. During her pregnancy, Rene suffered a paralyzing stroke that left lingering difficulties with vision, movement, and memory. Rene receives financial assistance from SSI, TANF, WIC, and sources related to her disability. At the time of her third interview, she had been in Early Head Start for 32 months.

Rene originally heard about Early Head Start from a case manager when her daughter was five months old. During her first interview, Rene said that she had been living with her boyfriend—the father of her child—when she experienced her life-altering stroke. The two had planned to marry but, after the stroke, Rene returned home so her mother could care for her. Nevertheless, Rene's boyfriend picked up Rene and her daughter early every morning and drove them across town to a baby sitter so Rene could attend school. She characterized Early Head Start as one of the "highlights" of her life, saying that program staff monitored the health of her child, offered guidance and information to help her become a better parent, provided personal support and counseling, and gave her the chance to socialize with other teen parents during monthly activities. The program also helped her focus on her role as a mother and motivated her to work toward personal goals. Among her goals, she planned to earn a high school diploma, become a chiropractor, continue her physical therapy, maintain a stable relationship with the father of her child, keep her daughter healthy, and fulfill her daughter's needs. She wanted the program to offer more frequent activities, particularly those aimed at parenting issues and hands-on projects.

At her second annual interview, Rene said she had finished her junior year in high school and quit her part-time work as a chiropractic assistant to spend more time with her daughter. She had broken up with her boyfriend, but continued to keep him in touch with his daughter. She remained frustrated by her disability, but felt she had grown as a result of adversity. To help her deal with the build-up of stresses from being a teenager, mother, daughter, sister, and student, she began attending mom's support groups. She had also recently moved into her own bedroom at her mother's boyfriend's house, which helped alleviated some family tensions. She said she appreciated the assistance of Early Head Start in providing emotional support, monitoring her daughter's health, helping her learn to become a better parent, informing her about child development and safety, answering her questions, and providing an overall supportive environment for young mothers and children. She rarely missed site-based activities and took her daughter to play groups during the summer when school was out. Her main goals for the coming year were to graduate from high school, get her daughter prepared for Head Start, and stay positive about her life.

Rene reached a major goal in the past year. "I graduated high school in May. This summer I've been being a mom and trying to get everything together to go to college, basically to try to tie up loose ends and go through all the programs they have so I can get some assistance to get my schooling so I can actually provide for my daughter." If everything works out, her daughter will accompany her to the college campus every day. "She's going to be at the Phoenix College

Child Care Center and she'll be in Head Start half a day because they work together. I can only have her there if I'm a student at the college."

She has worked on her other goals as well. "Every six months I had an IFSP (individual family service plan) and we would redo our goals. I wanted to get my diploma. I did that. And I wanted to make sure my daughter had a stable family life. We're working on that, talking about getting married, and trying to get a place together… my daughter's daddy, myself, and the baby. We're saving our money and looking around at apartment complexes… I want my daughter to go through Head Start and that way when she does start kindergarten she'll already be set. She already knows most of her ABCs and stuff so I just want her to continue to get that stimulation… Mostly I just want her to maintain her health and be a productive member of society eventually."

"[EHS] taught me... to understand the stages she's growing through developmentally... If she's getting into things I could...spank her, but what I'm able to do because of EHS is look at it from her perspective–she's only a kid and she's exploring her surroundings."

Early Head Start has influenced a change of career plans for Rene. "I had originally wanted to be a chiropractor, but with my disability I think that it would be a struggle, the physical part of it… Now I'm planning to study early childhood development. I'm going to be a Head Start teacher. I really got a lot out of this program and I just want to give back. "

She plans to go to college every day by bus—a challenge with her disability, but one she has worked on. "I went through mobility training my senior year with a vision and mobility specialist because of my blindness. We did a lot of training. I was getting up at 6 a.m. and he would be here at 6:30 to help me on my route to school. Once or twice a week we'd do a route from the school to a doctor's appointment or wherever."

Rene says that Early Head Start helped her deal with the stress of parenting. "I think the most stressful part was when I first had the baby, I was dealing with a brand new disability, being a brand new mom, not knowing anything about being a mom. And they basically took care of that part about learning what it was to be a mom and what children need at that age. They gave me a lot of support to help me realize that my disability wasn't anything but a challenge. It wasn't going to stop me."

The program assisted her in many other ways. "They did a lot with education, teaching us about our children's health. There were activity topics on sex ed, prevention of sexually transmitted diseases. That didn't apply to me at the time, but still I thought they were reaching out and trying to make a difference in a lot of these girls' lives, to be aware of lot of the different things that are out there. What they did do for me, personally, to help maintain my health was when I couldn't get somewhere because of lack of transportation, they provided transportation for me to appointments that I needed. And when I needed to get on birth control, my family support specialist took me. She actually went with me to my appointment and stayed with me."

The program gave her new parenting skills and perspectives. "Especially when she was first born…my family support specialist helped me figure out how to change the baby with one hand so I wouldn't have to depend so much on my family. And [Early Head Start] gave me an opportunity to interact with my child in a positive learning environment, between play groups and the activities that they have. And it gave me someone to talk to and vent my frustrations so I wouldn't take it out on my baby."

Rene was a regular at many program events. "I went to almost all of the [site-based activities]. Play groups every week, unless [my daughter] was sick or something. But I didn't go during school unless I was on break or something because I didn't want to miss school."

She and her daughter both enjoyed the play groups. "I liked to watch my daughter play with other kids and learn how to interact with other kids without being a bossy little two-year-old. And to learn in a positive environment how to play nicely. They teach them that, by exposing them to painting and using glue and glitter, and it was fun for her. She had a lot of fun."

Rene also attended mom's support groups regularly. "I would go every week. It was one of those things I did not miss unless I absolutely had to. It gave me an opportunity to spend time with other females that were basically in the same predicament that I was. Because when you're a teen mom you don't get a chance to go out with your friends. You kind of have your role basically stuck being a mom. So it gave me an opportunity to go out and meet new friends and give them some support and also get support with the issues I was having. And there was always the confidentiality thing so you didn't have to worry about it. The biggest rule was confidentiality."

Her family support specialist, who left Early Head Start a few weeks prior to the interview, was very important to her. "She was my favorite. I considered her somewhat like a sister even though it was a professional relationship. We got really close. I was really saddened when she left the program… She was always the most positive person in the world. Even when I was in the saddest, crankiest mood she could come over and be all smiles and stuff and we'd find something fun to do with the baby or something, like videotaping. I loved videotaping. "

They covered many topics during weekly home visits, including parenting and health issues. "In the beginning we discussed parenting a lot, because I didn't know anything then, but toward the end, after I had a year or so experience, I knew what my role was and mostly it was personal issues. She would help me by giving me a ride somewhere, like doctor's visits or getting my daughter her shots. She was always on top of that. She knew when my daughter turned six months she needed certain vaccinations. You never had to ask her for that information, she would keep track."

The nurses also visited. "Every six months they do an evaluation of the babies to see how they're growing. It kept me updated as to where she should be and where she was. She's very intelligent for her age. She's kind of tall for her age. She's right on target for growing, but she's kind of light as far as her weight."

Her family support specialist prepared her for the transition process. "She made me feel comfortable with the fact that Early Head Start was a stepping stone, and that I'm going onto bigger and better things. She said I had graduated from high school, was getting ready to go to college, was getting [control of] my social security check, doing all these things, making all these big transitions. It was the perfect time to transition out of Early Head Start, right?"

To reassure Rene, her family support specialist talked with her about her achievements. "The last visit I had with my family support specialist, we went through and looked at my IFSPs and we checked off which goals I had accomplished, and she was like, 'Wow, Rene, you've accomplished all of these.' It was cool to look back and see how far I had come. I'm taking care of my daughter. I've graduated high school. I'm walking."

Together, they developed a transition plan. "We decided on one home visit a month, and I wasn't going to mom's group anymore. I was going to go to play group, but that was more for my daughter's stimulation than for my support. When I got elected to the [Parent Policy] Council, that kind of changed it because I wasn't going to be leaving on the month that I planned on because I had to wait until the next election in November." Rene says she has adjusted to the transition. "I feel a lot better, especially because she is not my family support specialist anymore so I don't have to face losing her when I leave. And she prepared me for it."

She credits the program with making her more child oriented. "I learned that a baby is always going to be a first priority. It showed me a lot of different ways to deal with her. It taught me to be patient and to understand the stages she's growing through developmentally, and to be able to look at things from my daughter's perspective

before I go out and take action. If she's getting into things, I could go up and spank her, but what I am able to do because of Early Head Start is look at it from her perspective—she's only a kid and she's exploring her surroundings."

Although she still participates in site-based activities, she already misses the rest of the program. "The family support specialists, the staff, and the kids—my daughter got to grow up with them. I got to watch my friends' kids grow up from the time they were infants until the time they were three. When I was in mom's group, if I wasn't watching my daughter then I knew she was okay because all of the moms in our group, we'd take care of each other's kids. I miss that."

But she says that Early Head Start will have a lasting effect on her family. "It has given me what it set out to do. It has given me the support I need to become a better parent and a better role model for my daughter. And it has also given my daughter the environment where she can learn and become a better and smarter, more knowledgeable person as she grows."

Epilogue—Rene exited the program in November after her term on the Parent Policy Council expired. By then, she was taking classes at Phoenix College, her daughter was attending Head Start on the college campus, and she and the father of her child had found an apartment together. She was also working part time in the college's preschool, and again serving on the Parent Policy Council, this time as a representative of her daughter's Head Start program.

Crystal

Crystal, 20, and her 37-month-old son, live with Crystal's mother, stepfather, and two younger brothers in a modern well-kept home. Crystal works full time and receives AHCCCS benefits for her son. The father of her child sees his son weekly but rarely contributes child support. As of her third annual interview, Crystal had been enrolled in Early Head Start for 31 months.

Crystal learned about Early Head Start from an agency contact related to her pregnancy. During her first annual interview, she was living in a small guest house with David, the father of her child, who also participated in the interview. Both had dropped out of high school, but Crystal had recently returned with the intention of graduating. David held a job to support the family. They planned to marry. After seven months in the program, Crystal said that she valued Early Head Start for giving her information on child development and for monitoring her son's progress. She credited program staff with helping her meet her personal goals in education, and providing emotional support when she encountered problems. While her school schedule prevented her from attending any site-based activities, Crystal said she hoped to attend in the future.

At the time of her second interview, Crystal had achieved her goal of graduating from high school, but had broken up with David. She changed residences several times, and ended up living with her mother and stepfather while she searched for a job. During her moves, she lost contact with Early Head Start for a period of months, but later reconnected after establishing herself at her mother's house. She said that Early Head Start had helped her obtain low-cost medical care for her son, provided a reliable source of information regarding parenting and child safety, and had taught her useful methods of positive discipline. She appreciated the emotional support and helpfulness of program staff, and the periodic monitoring of her son's development. She said she hoped to attend site-based activities and play groups in the coming year.

Crystal accomplished some of her goals in the past year. Among them, she stayed steadily employed. "I changed jobs a couple of times but I've never been without one." She also temporarily fulfilled a goal to move out of her mother's house. "I've done a lot of moving, out for awhile and in with a roommate, but I'm back in the same place." She hasn't yet had time to meet her education goals due to lack of time and transportation. "I was going to take some night courses at GCC [Glendale Community College]. I want to try to start some, but I'm not going to make the fall semester... Right now it would be a little too overwhelming." She eventually hopes to study education. "I want to teach elementary school. My grandmother offered to pay some money for my initial classes, and after that I'll probably look into financial aid or grants."

She also made progress on some goals for her son's health. "His vaccinations are all up to date. He doesn't need shots again until he is four. And then, he had problems with his ears and we went and got tubes in his ears... We spent six months of doctor visits every week, a different medicine every other week, trying to figure out what was wrong with him. It took six months to get the referrals and approvals for the tubes."

Early Head Start staff have often helped her cope with stress. "My life hasn't been real great, and I haven't been good about talking with anybody or going to counselors. I keep a lot of it bottled up inside. But you get to a point where you can't push anymore of it down, and I've just broken into tears, gone into depression stages. And they've been there to talk to me. They've referred

me to their specialists. They've helped with medication. They've done all that for me."

She has received help on health issues. "They've checked to make sure that I've been healthy. My family support specialist went down to the DES office with me to apply for AHCCCS. She's given me other options on health care if I didn't qualify for AHCCCS, phone numbers to different low income places where they would base it on income as to how much they would charge you." Her family support specialist has also encouraged her interest in higher education. "She went down with me to GCC, and we looked around and picked up a packet on financial aid and asked a couple of questions."

The program has given her support and assurance regarding her parenting skills. "There's been a lot that has gone on in the last three years that, without them, I don't think I could have handled as well I did. They've helped a lot in figuring out developmentally if my son is on track. Just the fact that they've been telling me that I am excelling at being a good parent has helped."

"There have been a lot of things I would have been completely lost on or probably wouldn't have gotten help on without them– like finishing school, my son's health, and my emotional health..."

She still has not attended any play groups or support groups, but did go to some site-based activities. "I've been so busy working and going to school the last couple of years that I've been to only two. One was on positive discipline and one was on potty training. The potty training was neat because they had us do a game-type thing that showed us how a child perceives potty training. They taught us about how a lot of children are afraid of potty training, and gave us ideas. It was pretty informative."

Most of her program support has come through interaction with her family support specialists. She has had two since enrolling, the most recent for about a year. "She's really good. She's been helpful with transportation. She's been good at getting me information on things. If she doesn't know [the answer] she'll definitely look for it, even if she has to go through and ask 10 or 15 other people, make calls, or search through books and make copies. I've asked her everything from more help on positive discipline to his speech problem and ADHD. We've worked a lot on the discipline thing because he's been really wearing on me."

They discuss a variety of subjects during visits. "We usually do our goal sheet every six months, and then after that she'll ask me, 'Have you thought about school?' or whatever [as follow up]."

We've talked a lot about problems and relationships. It's more me talking and her listening, but that's perfectly fine because at that point all I really need is somebody to just listen. Because I don't have anybody at home or anywhere that I can just talk to."

Her family support specialist consults with her about her son's health. "There was a long strain of, Why is he not hearing me? What's wrong with his ears? And there were a lot of doctor's visits. My family support specialist would ask if he was okay, and what were [the doctors] doing." They discuss his safety as well. "She had a survey and asked me if I had anything to make him vomit. I didn't know there was anything like that, so she told me about it. We also talked about outlet covers and doorknob things. Now there are covers on the outlets and we have doorknob covers so he can't open the doors."

She has also been visited by other staff. "The nurse has been out. She does the basic developmental test. The child development/ disabilities specialist has been out. She does the more advanced forms. She has given me ideas on how to improve his development, like when he was having a problem putting puzzles together she told me things to do. With his speech problem she told me to try to get him to chew harder foods—she told me basically what was wrong and what to do to help strengthen the muscles in his mouth. She has also brought over books and pamphlets and told me some of the things he's going through are just part of a stage."

She has had referrals for emotional help. "In the last year I have seen the Early Head Start psychologist, she's come out. And I've also seen [a psychiatrist]—I had to go see him. He can prescribe pills for my depression." The medication helped her, but she stopped taking it. "I don't have medical insurance. If I did I'd still be on it. The psychiatrist wanted to up my dosage, but having to pay for it myself was just a little too hard to do."

In the past, she has received financial assistance from Early Head Start for her prescriptions. "They've paid for them before, I'm not a person who likes to keep asking for help. Its one of those things where they've paid for them enough." Instead, she hopes to get insurance. "I've been trying to fight for medical for me. I've tried DES and for some reason I make too much money [to qualify for AHCCCS] even though I only make minimum wage. I've been told about the premium sharing program and I was going to try get another application and apply for that, but with the job I have now, in six months I'll have full medical, dental, and vision benefits."

Crystal is close to exiting the program. "I knew eventually I'd be cut from it. At first my transition was supposed to be when my son turned three, but I had a bunch of things come up then and we decided to extend my transition until August. He's already turned three, in June."

Her family support specialist discussed the transition process with her. "They have a whole transition setup where we decide how many visits are left, if I want to go to any activities, if I need any more help from anybody else in the program, transportation. It's basically a map out of the last two months. I want to go to this month's activity because it is 'gymboree,' tumbling and stuff like that for my son."

She is working on getting her son set for school next year. "The only other thing planned was a meeting with one of the [child development/disabilities] specialists at Early Head Start to check him for ADHD. We haven't done that yet. We're trying to do that and everything else to get him into regular Head Start—one that is really good with speech problems because the child development/disabilities specialist thinks he might have a speech problem."

After three years of participation, she feels apprehensive about losing the program. "It's kind of scary. Because they've helped with so much and been there for so long it's going to be scary not to be able to call and say 'Hey, I need help with this or that."

She will miss the support most of all. "Just knowing that there's somebody there if I needed help with anything. There have been a lot of things I would have been completely lost on or probably wouldn't have gotten help on without them—like on finishing school, my son's health, and my emotional health. Now it's like, Okay, I'm on my own, who do I call if I have a question? They've always been so helpful with everything."

She says she has benefitted a lot from Early Head Start, but the single most important thing she has learned is this: "That I am a good parent… They've always been real supportive in making sure I knew that, for being as young as I am, I'm doing a good job as a parent."

Epilogue—Crystal exited Early Head Start less than one month after her final interview. In that time she stayed at her job and moved out of her mother's house and into an apartment with a roommate. Her son was not enrolled in Head Start as planned but, instead, continued to attend day care.

Diane

Diane, 18, and her two sons—37 months and nine months—live in a house belonging to her grandfather. Also residing in the house are Diane's grandfather, mother, school-aged aunt and, periodically, a younger brother. Diane earns some money from baby sitting, but no one else in the household is currently working. She receives AHCCCS and WIC benefits for her sons, and has applied for TANF, while her mother receives food stamps and her grandfather receives SSI. Her older son receives services from DDD. At the time of her third interview, Diane had been enrolled in Early Head Start for 35 months but had recently stopped receiving home visits because of her imminent transition out of the program.

Visiting nurses encouraged Diane to call Early Head Start shortly after her son's birth. At her first interview, she said she had dropped out of school in junior high and was currently on probation for minor offenses. With the help of Early Head Start staff, however, Diane had recently earned her eighth-grade diploma, was attending classes to obtain her GED, and had been looking for a job. She said the program had helped her learn about her son's behaviors and understand his development, and said that home visits and other program services reassured her about her son's development and showed her ways to teach him new things. She appreciated the program's role in helping her manage her anger and she said it had provided an enjoyable break from the dull routine at home. Among her personal goals were plans to do well in school, stay out of trouble, and get on birth control. Goals that involved her son included getting him more comfortable with other people, teaching him more words, improving his health, and improving his relationship with her.

At her second interview, Diane said she had seen improvement in her son's speech, and in his relationship with her, but said she had quit the GED program, gotten pregnant again, and failed to get off probation. She found conditions at home so tense and crowded that she had run away twice in the past year, and when she was home she usually slept on the living room couch. She said that her family support specialist helped her deal with personal stress and the tensions at home, provided transportation when needed, helped her follow through on decisions, and gave good advice on parenting, child development, and child health and safety. Her family support specialist had also helped her search for a job and improve some bad habits. Her goals included getting on birth control, completing her GED, and going to college. She said her favorite aspects of Early Head Start were the weekly play groups and the cheerful and supportive staff.

Diane gave birth to her second child in the past year, a healthy boy. "He's nine months now. He's starting to learn to walk. He pulls himself up on things and tries to walk." She also enjoys a better home situation. "It's a lot better. My grandfather kicked out my two uncles [who had been causing trouble], and now I have my own room. Everything is a lot more quiet and not so frustrating."

Her older son, meanwhile, has just started school. "It's called a preschool and gifted center. He has like a speech delay." He has made progress on some of the goals Diane set for his development and socialization. "Potty training he's doing really good. And he did really good with the kids over there [at play groups]. He likes to play with them."

She still hasn't made any progress, however, on many of her personal goals. "I know I didn't accomplish a lot of them. Probably because I didn't want it bad enough. That's why I didn't pass [in school]." But now she feels her attitude has changed. "I just want to be able to accomplish them and actually get up and do something instead of sitting around doing nothing. I want to get through school—it's something I really, really want." She plans to begin soon. "I'm probably going to start school next week for GED classes... Then I'm thinking about either taking some college classes or some computer classes. And I hope I can find a really good job, something that I can stay at for a while."

Early Head Start has continued to help her cope with stresses and frustrations in her life. "Sometimes I'd get sick of being stuck in my house a lot, so [my family support specialist and I] would go out and look for a school, or go to play group. And we'd talk about it and she'd help me find a way to solve it... With stress, she'd bring me papers with like stress relievers—what to do when you start to stressing out, like give somebody a hug or something like that.When she was around she brightened up my day a little more."

"Before I used to be really angry, but I'm not anymore. I got over that. Everybody helped me with my anger."

Her family support specialist also attempted to get her interested in school. "She tried, but sometimes I get stubborn and don't want to go, make up excuses. I think [Early Head Start staff] have gotten me through that, though. I think the activity coming up is for job and school fair, and I'm thinking about going to that. They gave me a lot of places to go to school."

The program has improved her parenting skills and child care practices. "They got me a car seat for my younger son. [They taught me about] feeding, what to feed him and what not to feed him. Things most babies could get really sick from eating... And like floor time. At first when my [older] baby was born, I didn't put him on the floor a lot and my family support specialist told me to put him on the floor because he'd be able to start doing more things like learning to crawl."

Early Head Start has also helped her understand her children's growth and development. "The nurse and my family support specialist brought books on stuff like that—like around certain ages what they should be doing, the things I should be doing. They helped me to do more things like that with both the boys." And the program monitored her children's health and development. "The nurse would come out and weigh him and tell me things to help him, like get him to crawl or get him to walk or stand. With my older son, talking was like our major thing. They'd bring out little cards and stuff to show him and get him to say things."

She says she has learned a more effective method of discipline from Early Head Start. "My family support specialist brought out papers on discipline. Before I used to yell because I'd get frustrated with my older boy. Now I just sit down and talk to him or put him in 'time out.' He likes to throw things at people, so I'm trying to teach him not to throw toys at people...whenever he does that we put him in time out." She prefers talking to yelling now. "I know he gets frustrated and starts crying [when I yell], and I feel bad for yelling at him, so I think it's easier to sit down and talk."

Diane has attended very few site-based activities. "I don't hardly go...I don't like big group settings." But she does like to go to play groups. "At least twice a month... My older son loves play groups, I guess because he gets to go and do things like play with the paint or clay, or play with the other kids...and he's away from the house, so it's more fun for him. He likes to get out."

Home visits have already stopped for Diane and she already misses her family support specialist, whom she has had since enrollment in the program. "We got along pretty good. I liked her a lot. She was nice, a really good person." During weekly home visits, they discussed many issues related to goals for her children and herself. "We talked about parenting and things that I needed to get done that I needed her to help with. She'd

bring me out papers for like baby food…or home activities that I could do with my son. About twice a month she'd ask what I was going to do for school, or exercise, whatever my goals were at the time.

They also talked about relationships at home. "Sometimes I get frustrated with my uncles or my mom or my grandpa. So we talked about it and ways to handle it. We'd find ways to go around it." They discussed family planning. "I started taking the Depo [birth control] shot but there was a problem with that for me, so I haven't gotten it again. I'm going to go back to the doctor and get the pills or something." And they talked about child health and safety. "We made sure the boys were up on their shots, and made sure they were healthy… My family support specialist helped me go to doctor's appointments when I couldn't get there, or bring me out bus tokens, make sure I got to all of the appointments for me and the boys…

And my family support specialist was always bringing me out stuff, like locks for the cabinets, and the little outlet plugs." The child development and disabilities specialist also visited. "She did a test on my older son and got us in touch with DDD."

Her family support specialist developed a transition plan with her. "Normally she'd visit once or twice a week, but toward the end when I was getting ready to leave [Early Head Start] it was like two or three times a month, and the other times I'd go to an activity or play group… They said I could still go to activities and play groups, but I think that's it. They were waiting for my son to start school so they could transition him into that. They didn't want to leave him without anything. I'm okay with it."

Diane can't think of any way to improve the program. "Everything is pretty good. I really liked being with them, and I'll miss them. They are really happy, bright people." She says the most important thing Early Head Start has taught her about parenting is this: "To have more patience, more understanding."

She credits staff with helping her manage what she calls her "short temper" during the last three years. "Before I used to be really angry, but I'm not anymore. I got over that. Everybody helped me with my anger."

Epilogue—Diane exited the Early Head Start program one month after her final interview. At the time, her older son was continuing to attend preschool and receive speech and language services.

Ruby and Luis

Ruby, 19, her husband, Luis, and their 38-month-old daughter exited Early Head Start in June of 1999. The couple had been enrolled in the program for 34 months. At the time of their departure, their daughter was pre-enrolled in a regular Head Start preschool program scheduled to begin in August. They also were living in their own house, owned a car, and both Ruby and Luis held jobs—Luis's employer providing health insurance that covered the family. They received WIC benefits for their daughter, but no other public assistance. Prior to leaving the program, Ruby and Luis participated in a brief exit interview. While they were conversant in English, they asked to be assisted by a Spanish translator.

Ruby and Luis found out about Early Head Start from Luis's sister who is the neighbor of a family support specialist. At their first annual interview, the couple lived in a well-kept apartment with one corner devoted to children's books, furniture, and toys. Luis was employed full time while Ruby was taking classes toward her GED. They received WIC and AHCCCS benefits for their daughter. The couple said that Early Head Start had showed them how to care for and teach their daughter. It had also provided items such as diapers and milk when they ran out. The program taught Ruby how to prevent a second pregnancy, helped her enroll in GED classes, and provided occasional transportation, particularly to get medical services or WIC. Both Ruby and Luis had attended and enjoyed site-based activities and appreciated their family support specialist's home visits, particularly the videotaping sessions of their daughter's progress.

At their second interview, Ruby and Luis had moved in with relatives in a small, well-maintained home. They felt cramped sharing the house, but their ultimate goal was to buy a home of their own, and the shared accommodations allowed them to save money faster toward that goal. In the past year, Ruby had found a part-time job, Luis had gotten a new construction job that provided health insurance, and they had purchased a car. The only public assistance they received was WIC benefits for their daughter. They said their work schedules were making it difficult to participate in Early Head Start, but they appreciated home visits when they could meet with their family support specialist. She gave them good parenting advice, helped Ruby find a job, monitored their child's health and development, taught them to be patient with their daughter, brought books and games for their daughter, discussed child safety issues with them, assisted them in dealing with health problems for both Ruby and their daughter, and helped them set goals. They enjoyed the site-based activities for the social opportunities they provided, and also because activity topics had taught them to read to their child regularly, use positive discipline techniques, and perform CPR. Ruby also liked the mom's support groups she had attended because they gave her the opportunity to talk about personal problems, share experiences, and get advice. They thought they might leave the program in the near future because they had gained some control over their lives and didn't need program services as much anymore.

Ruby and Luis say they expect to leave Early Head Start soon because the time is right. Ruby: "Our daughter is three. She will go to preschool and that will be the end of the program."

Their experience with Early Head Start has made them better parents, they both agree. Luis: "It helped us to take care of the baby." Ruby: "It taught us to be good parents, to be patient…how to live together as a family."

They enjoyed a good relationship with their family support specialist through their participation in the program. Ruby: "She was good. Like a nice friend. She was always ready to help us." Luis: "She would give our daughter tests to see how much she learned every week."

> *"We learned how to teach our daughter from birth. We were young, but we learned how to watch her and take care of her."*

When asked what they learned from the program, several things stand out. Luis: "We learned how to teach our daughter from birth. We were young, but we learned how to watch her and take care of her." Ruby: "They taught our daughter how to play with other children and be patient with them. We also got good advice on buying our first house."

Camilla

Camilla, 18, and her nearly 3-year-old daughter exited Early Head Start in late May 1999 and were not available for a third interview. Prior to her departure, Camilla told program staff she had gotten everything she wanted out of the program and was working on getting her daughter enrolled in regular Head Start. She had been consistently employed for several months prior to leaving the program, but had stopped attending activities and was not always available for home visits. She had been enrolled in Early Head Start for 32 months.

Camilla first learned about Early Head Start from a social worker at her former high school. At the time of her first annual interview, she was living with her boyfriend in a guest house behind his family's home. Also living in the neighborhood were her mother and grandparents, which gave her several options for child care help. Camilla was enrolled in a charter high school and expected to get an after-school job. Her boyfriend worked full-time. Camilla said that one of the attractions of Early Head Start was the opportunity it gave her to meet other teen parents in the site-based activities. She said the activities also provided information on how to become a good parent, and had helped her daughter learn to socialize with other children through play. She said she appreciated Early Head Start staff for helping her deal with government agencies, offering support with personal problems, answering her parenting and medical questions, and keeping track of her daughter's progress. Her primary goal in life, she said, was to finish high school, obtain a higher education, and get a good job so she could take care of her daughter.

At the time of her second annual interview, Camilla had moved back to her mother's house, where an older brother also resided. Camilla had quit the charter school, but was enrolled in a full-time GED program. She was not currently employed, and had spent most of the past year working. Her boyfriend, who still lived at his parent's home nearby, had only minor involvement with his daughter, but he remained employed and provided some necessities for the child as well as transportation for Camilla after school. For the vast majority of her household expenses and needs, however, Camilla relied on her mother. She still received no public assistance for herself or her daughter, but her school provided low-cost child care while Camilla was in class, and her brother and other relatives also helped out on occasion.

Camilla said that, over the past year, her daughter had become more difficult to cope with because she had reached toddler stage, but her family support specialist had helped her deal with the changes. Her family support specialist had also helped her deal with the tensions she felt with her boyfriend's family, and had encouraged her to stay on track with her life goals. Several program staff had given her information on how to care for her daughter and how to teach her to share with other kids, and they had also monitored her child's development through periodic evaluations and videotaping. She said she liked both of the family support specialists she had been assigned, as well as other program staff she'd encountered, describing them as "really kind" and saying "they try their best to do what they can to help you."

Michael

Michael, 20, was disenrolled from Early Head Start in March 1999 after he failed to meet with program staff and his son was not available to be seen for routine evaluations. The child was 25 months old at the time. Michael had been enrolled in the program for 28 months.

Michael's first contact with Early Head Start occurred through the mother of his child who, while still pregnant, heard about the program from a school nurse and subsequently enrolled. During his first annual interview, Michael lived with his mother, two younger brothers, and an older sister and her two young children in a relatively modern house. One of only a few fathers enrolled in Early Head Start as a primary caregiver, he had gained custody of his son while the boy's mother served a prison term. He held a full time job at a bank processing center and relied on his sister and mother to provide child care while he worked. Michael spoke highly of Early Head Start, particularly the personal attention and encouragement he had received. He said had the program helped him get a better job, enroll in school, and set goals. The program had also given him information about his son's development, provided monitoring of his son's health, and offered him "someone to talk to" for counseling and advice. His goals were to finish high school, join the military, get a job, get his own place to live, keep his son healthy, and work on his son's language skills.

At the time of his second annual interview, Michael was not available for a visit. According to Early Head Start records and staff, he had lost his job, left his mother's home, and not responded to calls from program personnel. Prior to this break in communication, Michael had given his son's maternal grandmother permission to take the boy for an extended visit. His son's mother, meanwhile, continued to serve a prison term with her release expected in late 1998. In fall of 1998, Michael reestablished contact with Early Head Start and was assigned a new family support specialist. He subsequently found a job, retrieved his son, and began participating in some program services. After his son's mother was released from prison in Tucson, Michael sent the boy to live with her. At this point he was informed he would be disenrolled from the program, but he attempted to retrieve the boy again and continue program services. He participated in an exit interview in early 1999, one month before his eventual disenrollment.

At the time of his exit interview, Michael was living in an apartment with a new girlfriend who was pregnant with his child. He had just started a new job at a home improvement store. While he had not been attending program activities or groups, and had not scheduled evaluations with the nurse or child development/disabilities specialist, he had been receiving home visits from his new family support specialist. Michael said his family support specialist had helped him monitor his son's health and deal with custody problems. She had also helped him become a stronger parent and influenced him to try non-violent means of discipline. She discussed strategies for him to better manage his finances. His goals remained similar to what they had been a year and a half earlier—he planned to earn his GED and then either take some college level classes or train for a job with the fire department. Looking back over the more than two years he had been in the program, Michael said that what he appreciated most of all was the emotional support Early Head Start had provided, as well as the inspiration it gave him to keep trying to succeed regardless of any mistakes or misfortune. He said the only way the program could have helped him more is "if they moved in with me," and he credited the program with teaching him "everything" about how to be a parent. Michael said he hoped to convince his new girlfriend to enroll in the program before she gave birth so he could stay connected to Early Head Start staff. Otherwise he said, "I feel like if I lose the program, I lose a piece of my backbone."

Liana

Liana, 18, her 25-month-old daughter, and 6-month-old son were disenrolled from Early Head Start in December 1998. Liana had missed several consecutive home visits, moved out of her last known address, and had not contacted program personnel. She had been enrolled in Early Head Start for almost 25 months.

Liana learned about Early Head Start from nurses involved with the birth of her baby. During her first annual interview, she was living with an older male acquaintance and his two children in a small, rundown apartment where she took care of housekeeping in exchange for shelter and some food. They moved frequently, and her only source of income was a job selling tamales on the street. The father of her daughter was not involved with her in any way. Coming from an abusive family situation in Central America where she was not allowed to attend school, Liana could not read or write adequately in Spanish, her primary language, and she spoke almost no English. She said Early Head Start had helped her learn how to care for a baby, and it taught her daughter play skills. The program had also provided transportation to doctor appointments and important meetings, and staff sometimes gave her translation assistance. She regularly attended site-based activities, both for the chance to socialize with other teen parents and for the child-care instruction she received. She was actively serving on the Parent Policy Council, and said it was one of her favorite aspects of the program. Her son received WIC and AHCCCS benefits, but Liana qualified for no additional public assistance.

At the time of her second annual interview, Liana had moved to a substandard, sparsely furnished mobile home with unreliable water, heating, and air conditioning. She resided with the same man (who she now referred to as her boyfriend) and his children as the year before, and she had recently given birth to a son by him. Her boyfriend allowed her to use his car, and he also provided some financial support for Liana and her children, but she was looking for a job—a search that was complicated by the fact she had no work permit. Liana no longer received any public assistance benefits for herself or her children. She was currently assigned to her third family support specialist in two years.

Liana said that, throughout her enrollment in Early Head Start, program staff had regularly monitored her children and helped keep them healthy and immunized. The program also helped her understand how her children developed. Her participation in Early Head Start, however, had dropped off dramatically during the past year. She frequently failed to be home for scheduled visits, and she also stopped going to site-based activities and gave up her position on the Parent Policy Council. This was due, she said, to various jobs and what she characterized as a "hard pregnancy" with her son. Nevertheless, Liana said she missed the social aspects of the activities and hoped to get involved again soon. Within three months after her second interview, program staff had lost all contact with her.

Whitney

Whitney, 16, her 16-month old son, and her 2-month-old daughter were disenrolled from Early Head Start in April 1998 after she moved away from her last known residence and failed to maintain contact with program staff. She was not available for her second annual interview. Whitney had been enrolled in the program for 18 months.

Whitney was pregnant with her first child when she first heard about Early Head Start from a high school counselor. She had been raised primarily by her grandmother because her mother reportedly had drug problems and had been arrested several times. After several months in the program, Whitney moved in with an aunt and cousin in a relatively modern house in far northwest Phoenix. During her first annual interview, she said she was four months pregnant with a second child and was concerned about her future because she wanted to marry the father of her children, but was legally constrained from seeing him because she was a minor and he an adult. Regarding her experience in Early Head Start, Whitney said the program had helped her in several ways: it provided transportation to appointments and meetings, taught her about child development, and gave her someone to talk to about problems. She said she enjoyed site-based activities, though she had attended only a few. Her goals were to go to school, complete her education, get a good job, and show her son more love.

In the seven months between her first interview and disenrollment, Whitney made little progress in her life circumstances according to program records and staff interviews. She gave birth to a second child, a daughter, but the father—who was also father of her son—had been imprisoned because of their age status and she was unable to have contact with him. For a brief time she moved to a cousin's apartment, but was forced to leave because her behavior was considered inappropriate by the cousin. At disenrollment, she'd been receiving public assistance in the form of TANF, WIC, and AHCCCS.

Whitney also made little progress on her goals. She had taken no action related to her goals of getting an education and earning a living. She also showed no improvement in her parenting skills, usually choosing to send her son away from home during her family support specialist's home visits. Though she followed through on a program referral to the mental health specialist, she had attended no site-based activities or other events in several months. Based on the quality of her participation, Early Head Start staff believed she primarily regarded the program as a means of obtaining transportation, material goods, and help in a crisis.

Tony:

"This [program] was never around when I was a kid. I'm not saying it's okay to be a teenage parent, but my children...are going to have a better start school-wise than what I had... [They] are going to be really educated to the point where they're able to graduate..."

Rene:

"[EHS] has given me what it set out to do. It has given me the support I need to become a better parent and a better role model for my daughter. And it has also given my daughter the environment where she can learn and become a better and smarter, more knowledgeable person as she grows."

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